Introduced by Assembly Member Arambula

February 17, 2010

An act to amend Sections 18961.5 and 18986.46 of the Welfare and Institutions Code, relating to child abuse.

LEGISLATIVE COUNSEL'S DIGEST

AB 2015, as introduced, Arambula. Child abuse: interdisciplinary and integrated services.

Existing law authorizes a county to establish a computerized data base system within the county to allow designated provider agencies, as defined, to share identifying information regarding families at risk for child abuse or neglect, for the purpose of forming multidisciplinary personnel teams, for the prevention, identification, management, or treatment of child abuse.

This bill also would include the tracking of child abuse as one of the specified objectives of the multidisciplinary teams using the computerized database system.

Existing law provides for the establishment of integrated children's services programs, coordinated children's service systems that offer designated services to children and families. Under existing law, children's multidisciplinary services teams, consisting of two or more persons trained and qualified to provide one or more of the designated services, are responsible in the program for identifying the educational, health, or social service needs of a child and his or her family, and for developing a plan to address those needs.

Under existing law, an integrated children's services program is permitted to establish a unified services record for a child and family, AB 2015 -2-

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containing specified records of prior services that are released to the program and are relevant and necessary to formulate an integrated services plan, pursuant to valid written authorizations.

This bill also would authorize records of prior services, as contained in the unified service record, to be released pursuant to electronic authorizations.

Vote: majority. Appropriation: no. Fiscal committee: no. State-mandated local program: no.

The people of the State of California do enact as follows:

SECTION 1. Section 18961.5 of the Welfare and Institutions Code is amended to read:

18961.5. (a) Notwithstanding any other provision of law, any county may establish a computerized data base system within that county to allow provider agencies, as defined in subdivision (h), to share identifying information, as specified in subdivision (c), regarding families at risk for child abuse or neglect, for the purpose of forming multidisciplinary personnel teams, as defined in subdivision (d) of Section 18951, for the prevention, identification, *tracking*, management, or treatment of child abuse.

- (b) Each county shall develop its own standards for defining "at risk" before joining this system. Only information about children or the families of children at risk for child abuse or neglect may be entered into a computerized data base system established pursuant to this section.
- (c) With regard to a case in which a child or family has been identified as at risk for child abuse or neglect under this section, only the following information shall be entered into the system:
- (1) The name, address, telephone number, and date and place of birth of family members.
 - (2) The number assigned to the case by each provider agency.
- (3) The name and telephone number of each employee assigned to the case from each provider agency.
- (4) The date or dates of contact between each provider agency and a family member or family members.
- (d) The information may only be entered into the system by, or disclosed to, provider agency employees designated by the director of each participating provider agency. Members of the multidisciplinary personnel teams shall be drawn from these

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designated employees, or other persons, as specified in Section
18961. The heads of provider agencies shall establish a system by
which unauthorized personnel cannot access the data contained in
the system.

- (e) The information obtained pursuant to this section shall be kept confidential and shall be used solely for the prevention, identification, *tracking*, management, or treatment of child abuse, child neglect, or both.
- (f) This section shall not supplant any duties required by the Child Abuse and Neglect Reporting Act (Article 2.5 (commencing with Section 11164) of Chapter 2 of Title 1 of Part 3 of the Penal Code).
- (g) No employee of a provider agency which serves children and their families shall be civilly or criminally liable for furnishing or sharing information as authorized by this section.
- (h) For the purposes of this section, "provider agency" means any governmental or other agency which has as one of its purposes the prevention, identification, *tracking*, management, or treatment of child abuse or neglect. The provider agencies serving children and their families which may share information under this section shall include, but not be limited to, the following entities or service agencies:
- 23 (1) Social services.
- 24 (2) Children's services.
- 25 (3) Health services.
- 26 (4) Mental health services.
- 27 (5) Probation.
- 28 (6) Law enforcement.
- 29 (7) Schools.

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- SEC. 2. Section 18986.46 of the Welfare and Institutions Code is amended to read:
 - 18986.46. (a) A program shall utilize children's multidisciplinary services teams, as defined in this chapter.
 - (b) A team member shall provide program services only as employed by, under contract with, or otherwise affiliated with, the program, and shall not share information, or provide program services, when acting as a separate local, state, or private agency or entity.
- 39 (c) A program shall be considered a single program for purposes 40 of federal substance abuse program regulations contained in Part

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2 (commencing with Section 2.1) of Title 42 of the Code of Federal
 Regulations.
 (d) Notwithstanding any other provision of law regarding

- (d) Notwithstanding any other provision of law regarding disclosure of information and records, a program shall be permitted to establish a unified services record for a child and family. That record shall contain all records of prior services that are released to the program and that are relevant and necessary to formulate an integrated services plan, pursuant to valid written authorizations, *including electronic authorizations*, as well as a record of all service provided under the program.
- (e) Notwithstanding any other provision of law regarding disclosure of information and records, when a child enters the program a parent, guardian, judicial office with jurisdiction over the minor, or a minor with legal power to consent, shall be asked to sign a single authorization that gives a knowing and informed consent, in writing, and that complies with all other applicable provisions of state law governing release of medical, mental health, social service, and educational records, and that covers multiple service providers, in order to permit the release of records to the program. This single authorization shall not include adoption records. The authorized representative of the child, or the child in a case where he or she has the legal right to consent, shall be fully apprised of the requirements of this subdivision prior to participation in the program. Before information may be exchanged about a particular child or family pursuant to this chapter, a representative of the program shall do all of the following:
- (1) Explain to the authorized representative of the child, or the child in a case where he or she has the legal right to consent, both of the following, and this explanation shall be given before any information about the child or family is recorded and before any services are provided:
- (A) Information provided by the child or family may only be exchanged within the program with the express written consent of the authorized representative.
- (B) Information shall not be disclosed to anyone other than members of the multidisciplinary children's services team, and those qualified to receive information as explained in subdivision (i).
- (2) The authorized representative of the child, or the child in a case where he or she has the legal right to consent, shall be

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informed that he or she has a right to refuse to sign, or to limit the scope of, the consent form, and that a refusal to sign, or to limit the scope of, the consent form will not have an adverse impact on the client's eligibility for services under the programs described in this chapter.

- (f) The knowing and informed consent given pursuant to this chapter shall only be in force for the time that the child or family is a client of the program.
- (g) (1) Notwithstanding any provision of state law governing the disclosure of information and records, persons who are trained, qualified, and assigned by their respective agencies to serve on teams within a program and other team members included pursuant to this chapter may view relevant sections of unified program records and may disclose to one another relevant information and view records on a child or the child's family as necessary to formulate an integrated services plan or to deliver services to children and their families.
- (2) This information and records may include information relevant to the evaluation of the child and his or her family, the development of a treatment plan for the child and his or her family, and the delivery of services. Relevant information and records shall be shared with family members or family designees on the team, except information or records, if any, disclosure of which the team determines would present a reasonable risk of a significant adverse or detrimental effect on the minor's psychological or physical safety.
- (h) (1) If the members of a multidisciplinary services team within an integrated children's services program require records held by other team members, copies may be provided to them.
- (2) Notwithstanding any other provisions of law regarding disclosure of information and records, a program may establish and maintain a common data base for the purpose of delivering services under the program. The data base may contain demographic data and may identify the services recommended for, and provided to, a child and his or her family by the program. The data base shall be for use and disclosure only within the program, except by properly authorized consent by a parent, guardian, judicial officer with jurisdiction over the child, or a minor with

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- (3) The program may authorize use of information contained in the data base for bona fide evaluation and research purposes, unless otherwise prohibited by law. No information disclosed under this paragraph shall permit identification of the individual patient or client. The release of copies of mental health records, physical health records, and drug or alcohol records in programs establishing a unified services record shall be governed by the single authorization of informed and knowing consent to release these records. In programs not establishing a unified services record and not utilizing the single authorization of informed and knowing consent, release of these records may take place only after the team has received a form permitting release of records on the child or the child's family, signed by the child, to the extent the records were generated as a result of health care services to which the child has the power to consent under state law, or, to the extent that the records have not been generated by the provision of these health care services, by the child's parent, guardian, or legal representative, including the court which has jurisdiction over those children who are wards or dependents of the court.
- (i) The multidisciplinary team may designate persons qualified pursuant to Section 18986.40 to be a member of the team for a particular case. A person designated as a team member pursuant to this subdivision may receive and disclose relevant information and records, subject to the confidentiality provisions of subdivision (k).
- (j) The sharing of information permitted under subdivision (g) shall be governed by memoranda of understanding among the participating service providers or agencies in the coordinated children's service system or program. These memoranda shall specify the types of information that may be shared without a signed release form, in accordance with subdivision (e), and the process to be used to ensure that current confidentiality requirements, as described in subdivision (k), are met. This paragraph shall not be construed to waive any right of privilege contained in the Evidence Code, except in compliance with Section 912 of that code.
- (k) Every member of the children's multidisciplinary services team who receives information or records on children and families served in the integrated children's services program shall be under the same privacy and confidentiality obligations and subject to the

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same confidentiality penalties as the person disclosing or providing the information or records. The information or records obtained shall be maintained in a manner that ensures the maximum protection of privacy and confidentiality rights.

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- (*l*) This section shall not be construed to restrict guarantees of confidentiality provided under federal law.
- (m) Information and records communicated or provided to the program, by all providers, programs, and agencies, as well as information and records created by the program in the course of serving its children and their families, shall be deemed private and confidential and shall be protected from discovery and disclosure by all applicable statutory and common law protections. Civil and criminal penalties shall apply to the inappropriate disclosure of information held by the program. Nothing in this section shall be construed to affect the authority of a health care provider to disclose medical information pursuant to paragraph (1) of subdivision (c) of Section 56.10 of the Civil Code.